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APPLICANTS

Susumu Takahashi, Iruma-shi, JAPAN;
 Shinichi Nakamura, Tokyo, JAPAN;
 Tsutomu Takebayashi, Tokyo, JAPAN;

**** CONTINUING DATA ******* *sm*

This application is a DIV of 09/053,094 04/01/1998 PAT 6,306,082
 which is a DIV of 08/404,890 03/16/1995 PAT 5,743,846

**** FOREIGN APPLICATIONS ******* *sm*

JAPAN H6-47189 03/17/1994
 JAPAN H6-264004 10/27/1994
 JAPAN H6-103084 05/17/1994

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JAPAN	SHEETS DRAWING 51	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 6
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Verified and Acknowledged *[Signature]* Initials

ADDRESS
 23850
 ARMSTRONG, KRATZ, QUINTOS, HANSON & BROOKS, LLP
 1725 K STREET, NW
 SUITE 1000
 WASHINGTON, DC
 20006

TITLE
 Stereoendoscope wherein images having passed through plural incident pupils are transmitted by common relay optical systems

☐ All Fees

<p>FILING FEE RECEIVED 5898</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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